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Attorney Docket No.: 02SPE135P

AMENDMENT COVER SHEET

RECEIVED

IN RE APPLICATION OF: Sharma, et al.

SERIAL NO.: 09/370,508 FILED: August 6, 1999

OCT 17 2003

FOR: Anti-Reflective Coating and Process Using an Anti-Reflective Coating

TC 1700

HONORABLE COMMISSIONER FOR PATENTS

P.O. Box 1450, Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

☐ No additional fee is required.

☒ The fee has been calculated as shown below:

	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	110.00	55.00	\$
SECOND MONTH AFTER TIME PERIOD SET	420.00	210.00	\$
THIRD MONTH AFTER TIME PERIOD SET	950.00	475.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,480.00	740.00	\$

☐ TOTAL EXTENSION FEE \$ 0.00

☒ FEE FOR EXTRA CLAIMS added by Amendment in this response:

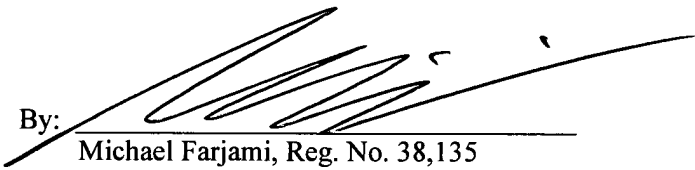
	Column 1 Number of Claims after Amendment	Column 2 Number Previously Paid for	Column 3 Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	29	MINUS **29	* = 0	x 18	x 9	\$
INDEPENDENT	6	MINUS ***5	* = 1	x 86	x 43	\$ 86.00
First presentation of multiple dependent claim				+ 290	+ 145	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 86.00

- * If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.
 ** If the number of Total Claims previously paid for is less than 20, write "20" in this space.
 *** If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

- ☐ Total fee for Supplemental Information Disclosure Statement \$
- ☒ Enclosed is the total fee of \$ 86.00 (Payment by Credit Card, Form PTO-2038 Enclosed).
- ☐ Please charge Deposit Account No. 50-0731 in the amount of \$
- ☒ The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.


Date: 10/3/03

By: 
Michael Farjami, Reg. No. 38,135

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA, 22313-1450, on:

10/3/03
Date


Signature

Lori Llave
Typed or Printed Name of Person Mailing Paper and/or Fee

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